

OAHU CANDIDATES-
SUBMIT 1 ORIGINAL AND 1 COPY

NEIGHBOR ISLAND CANDIDATES-
SUBMIT 1 ORIGINAL AND 2 COPIES

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

DISCLOSURE REPORT
CANDIDATE COMMITTEE

COPY

PLEASE TYPE OR PRINT CLEARLY WITH INK (INSTRUCTIONS FOR COMPLETING THE DISCLOSURE REPORT CAN BE FOUND IN THE "GUIDEBOOK FOR CANDIDATE COMMITTEES.")

SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:

(a) Candidate Name:

Josh Green

(b) Committee Name:

Friends of Josh Green

(c) Mailing Address:

P.O.B. 390028

Keanohu HI 96739

(d) Phone (Bus)

(206) 799-2717 (Res)

same

Treasurer's

SECTION II-TYPE OF REPORT:

(See the Schedule of Reporting Dates to complete this section)

- ☒ 1st Preliminary Primary ☐ Amended ☐ First ☐ Third
☒ 2nd Preliminary Primary ☐ Short Form ¹ ☐ Second ☐ Fourth
☐ Final Primary
☐ Preliminary General
☐ Final Election Period
☐ Supplemental

REPORTING PERIOD

7/1/5 through 12/31/5

SECTION III-SUMMARY OF RECEIPTS AND DISBURSEMENTS
(Complete Section IV on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD ² TOTAL TO DATE	
1. Cash on Hand at the Beginning of the Election Period ²		1374	1
2. Cash on Hand at the Beginning of this Reporting Period.....	2762		2
3. Total Receipts (From Line 15).....	8935	14540	3
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	11697	15914	4
5. Total Disbursements (not including Unpaid Expenditures) (From Line 19).....	3494	7711	5
6. Cash on Hand at the Closing of this Reporting Period (Subtract Line 5 from Line 4)....	8203	8203	6
7. Total Loans at the Closing of this Reporting Period.....	10,000		7
8. Total Unpaid Expenditures at the Closing of this Reporting Period.....	0		8
9. Debts Owed at the Closing of this Reporting Period (Add Lines 7 and 8).....	10,000		9
10. Surplus/Deficit (Subtract Line 9 from Line 6).....	-1797		10

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Joshua B. Green M.D.

Candidate Signature

Date

JA

Treasurer Signature

1/10/6

Date

¹ Short Form is checked if the candidate is filing a Preliminary, Final or Supplemental Report and has aggregate contributions and aggregate expenditures for the reporting period totaling \$2,000 or less. Short form reporting requires completion of only Section I, Section II, and Section III of this Disclosure Report.
² An Election Period is the two-year period between general election days if a candidate is seeking nomination or election to a two-year office and the four-year period between general election days if a candidate is seeking nomination or election to a four-year office.

Friends of Josh Green

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SECTION IV-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS
(If Necessary, Complete Schedules A through E Before Completing This Section)

RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE	
11. Contributions From:			11
(a) Individuals/Other Entities/Noncandidate Committees/Political Parties			11(a)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	2235	4640	11(a)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	6700	9900	11(a)(ii)
(iii) Subtotal (Add Lines 11(a)(i) and 11(a)(ii)).....	8935	14540	11(a)(iii)
(b) Candidate or Candidate's Immediate Family			11(b)
(i) Monetary and Non-Monetary Contributions of \$100 or Less.....	0	0	11(b)(i)
(ii) Monetary and Non-Monetary Contributions of More Than \$100.....	0	0	11(b)(ii)
(iii) Subtotal (Add Lines 11(b)(i) and 11(b)(ii)).....	0	0	11(b)(iii)
12. Total Contributions (Add Lines 11(a)(iii) and 11(b)(iii)).....	8935	14540	12
13. Public Funds and Other Receipts.....	0	0	13
14. Loans.....	0	0	14
15. Total Receipts (Add Lines 12 through 14).....	8935	14540	15
DISBURSEMENTS			
16. Expenditures.....	3494	7711	16
17. Loans Repaid or Forgiven.....	0	0	17
18. Unpaid Expenditures Paid or Forgiven.....	0	0	18
19. Subtotal Disbursements (Add Lines 16 through 18).....	3494	7711	19
20. Unpaid Expenditures.....	0		20
21. Total Disbursements (Add Lines 19 and 20).....	3494	7711	21

CHECK ONLY ONE BOX
SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

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OF

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Friends of Josh Green

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Ray Fahn 3577 Pinao St HNL HI 96822</i>		150.	150.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Mar+Robin Miyamoto 1340 Lunalilo Hm Rd HNL HI 96825</i>		100.	100.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Jill Oliveira-Buy 45-0244 Lili Rd Kaneohe, HI 96744</i>	<i>check returned</i>	100.	100.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Michael Kellar 45-401 Mokulele Dr. Kaneohe HI 96741</i>		100.	75.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Barbara Higa Rogers 933 Ailuna St. Honolulu HI 96821</i>		35.	35.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Lawrence A. Parker POB 61374 Honolulu HI 96839</i>		100	100.

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

60.

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on

CHECK ONLY ONE BOX
USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 7

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION William Zwack 47-495 Ahumoa Rd Kaneohe HI 96744		100.	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Jean Adams-Lalor 4211 Waiala Ave Jk Honolulu HI 96816		100	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Mavis Mizumoto 2603 Puka St. HNL HI 96816		75	75
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Karl Mink 700 Richards St. #2205 HNL HI 96813		50	50
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Thomas Glass 2443 Pacific Heights Apts Honolulu HI 96813		50	50
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Claudette Ozora 1188 Bishop St. 1416 Honolulu HI 96813		50	50
SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....			425.	
TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total the applicable Line Number of the Disclosure Report - 11(a)(iii) or 11(b)(iii)).....				

Form CC-5(A) (Rev. 5/99)

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USE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE

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OF

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DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Karna Jishi-Peters 46-001 Kamehameha Hwy Ste 4198 Kaneohe HI 96744		50.	50.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION ABC Consultants Dirk Elting PhD Castle Professional Bldg 46-001 Kam Hwy #409 Kaneohe HI 96744		100.	100.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Jeffrey Crawford POB 815 Kailua HI 96734		100.	100.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Rosemary Adam-Turn 18 33 Kalaheo Ave. Suite 800 Hanalei HI 96815		100	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Warrn Loos 1188 Bishop St #1412 Honolulu HI 96813		100	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION June Ching 936 Waiholo St. Honolulu HI 96821		100.	100.

SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

550

TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total

to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

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- ☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
- ☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

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Friends of Josh Green

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Donna Meier 1917 Huen Place Honolulu HI 96813</i>		50.	50.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Kathleen Brown 98-707 Iho Ave 805 Aiea HI 96701</i>		150.	150.
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Thomas Cummins 589 Lana St. Kailua HI 96734</i>		100	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Tanya Schwartz 1123 Kookoo Place Kailua HI 96734</i>		100	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>L.M. Johnson LLC Cathy Sp 1142 Bishop St. 1711</i>		100.	100
8/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Richard Koppert 1188 Bishop St Honolulu HI 96813</i>		100	100

SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

600.

TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total

the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

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SE SEPARATE SCHEDULE(S) FOR EACH CATEGORY BELOW

INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE
COMMITTEES/POLITICAL PARTIES

CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

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DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
8/15/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Hawaii Psychology Assn cash don 912 1188 S Wai'aleale Dr Honolulu HI 96813	psychology	100	100
8/26/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Opus Engineering Local 3 District 17 PAC 1620 South Loop Rd Alameda CA 94502	Union Opus Engineering	1000.	1000.
10/28/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Steve Piker PhD 125 Rutgers Ave Swarth PA 19081	professor	500.	500.
10/28/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Jill Olinara 2117A Lanika Dr Honolulu HI 96822	psychology	100.	100.
10/28/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Anheuser Busch see memo	vendor	100.	100.
11/5/15	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Eric Green 52 Dean St Concord MA 01742	lawyer	2000-	2000

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

3800.

2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(iii) or 11(b)(iii)).....

Form CC-5(A) (Rev. 5/99)

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STATE OF HAWAII CAMPAIGN SPENDING COMMISSION

SCHEDULE A MONETARY AND NON-MONETARY CONTRIBUTIONS CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

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DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
11/5/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Tim Merrill 111 Branch Ave Charlottesville VA 22903	student	100-	100-
11/21/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION R Kehl Sink 1983 San Luis Ave #33 Mountain View CA 91043	engineering	1000.	1000.
12/16/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Alhane 7 Roadside Care Admin 99-063 Pauley Place Aiea HI 96701	caregivers	100-	100-
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

3. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....

1200

4. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total
to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

Form CC-5(A) (Rev. 5/99)

With the exception of loans and unpaid expenditures that are forgiven, non-monetary contributions must also be reported as an "Expenditure" on Schedule B.

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- ☐ INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES/POLITICAL PARTIES
- ☐ CANDIDATE OR CANDIDATE'S IMMEDIATE FAMILY

STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION

SCHEDULE A
MONETARY AND NON-MONETARY CONTRIBUTIONS
CANDIDATE COMMITTEE

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 7 OF 7

Friends of Josh Green MD

DATE OF DEPOSIT OR RECEIPT OF NON-MONETARY CONTRIBUTION	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF DONOR	FOR AGGREGATES OF \$1,000 OR MORE NAME OF EMPLOYER	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT	OCCUPATION		
12/14/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Mary Frances Shanahan 357 Spillway Rd West Hurley NY 12491-5143	landlord	500.	500
12/14/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Ron Webster 150 West 79 Street NEW YORK, NY 10024-6431	doll maker	500.	500.
12/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION James Shanahan 11 Delta Pl. Kingston NY 12401	programmer	200.	200.
12/15/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION OE PAC POB 88298 Honolulu HI 96830	union	200.	200.
12/31/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kraft Foods Honolulu	food industry	500.	500.
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (This Page).....
2. TOTAL MONETARY AND NON-MONETARY CONTRIBUTIONS THIS PERIOD (Last Page Only) (Transfer total to the applicable Line Number of the Disclosure Report - 11(a)(ii) or 11(b)(ii)).....

1900

8935.

Form CC-5(A) (Rev. 5/99)

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**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 1 OF 2

FRIENDS of JOSH GREEN

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
8/10/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Service Printers Hawaii 1824 Dillingham Blvd Honolulu HI 96819	Walky Price	1124. ⁴⁴
9/19/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION American Express POB 0001 LA CA 90096-0001	Stamp (74), costed with 64 KTA papers for constitutes	174. ³³
9/20/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Kona Outdoor Circle 76-6280 Kuehn Kona HI 96740	talk story Hepatitis program	\$238.
10/1/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Allen McCune mile 4.0 White Sand Subdiv Kona Kona HI 96740	consultant fees	\$500.
10/26/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION Allen McCune 76-6280 White Sand Subdiv Kona Kona HI 96740	consultant fees Nov/5	\$1500.
10/27/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION American Express Bank POB 0001 Los Angeles CA 90096-0001	food/meeting with consultants	\$167. ¹⁵
10/28	<input type="checkbox"/> NON-MONETARY CONTRIBUTION T & C Computer Service Paid via AAFP, MBNA American POB 15238 Wilmington DE 19886	website service	291.51
1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....			2994
2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....			

Form CC-5(B) (Rev. 5/99)

**STATE OF HAWAII
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B
EXPENDITURES
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME:

PAGE 2 OF 2

Friends of Joel Green

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
12/1/5	<input type="checkbox"/> NON-MONETARY CONTRIBUTION <i>Alta McClure</i> <i>ex previous</i>	<i>Consulting fee.</i>	500.
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		

1. SUBTOTAL OF EXPENDITURES THIS PERIOD (This Page).....

500.

2. TOTAL EXPENDITURES THIS PERIOD (Last Page Only) (Transfer total to Line Number 16 of the Disclosure Report).....

3494.